Substitute for form 1449/PTO (Revised 07/2007)			Complete if Known					
			Application Number		10/552,135			
(1141.000 01.			Filing Date		10/06/2005			
INFO	RMA	TION DISCLOSURE	First Named Inventor		Blackwell 3612			
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Sheet	1	of 2	Attorney Docl	ket Number	per 038151/294772			
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	1	Document Number	J. S. PATENT D	OCUMENI	. 5			
Examiner Initials*	Cite No.	Number - Kind Code (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document H. Gutman A.V. Williams		Pages, Columns, Lines, Where Relevant Passages of Relevant Figures Appear		
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Examiner				Date Considere	d l			

^{*}Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Substitute fo	r form 1	449/PTO		Complete if Known						
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(Use as many sheets as necessary) Sheet 2 of 2			2	Attorney Docket Number 0318151/294772						
				OTHER DOCUMENTS			English			
Examiner Initials*	Cite No.	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.								
	16	Civil Docket for Case #: 2:07-cv-00231-wks; Mobile Medical International Corporation v. Advanced Mobile Hospital Systems, Inc. et al., District of Vermont, printed August 14, 2008 (Pages 7)								
	17	Exhibit No. 3 of Document No. 1(Complaint) of Cite No. 16 above; filed October 30, 2007 (4 pages.) Exhibit No. 20 of Document No. 10 (Motion for Partial Summary Judgment) of Cite No. 16 above; filed March 6, 2008 (12 pages)								
	18									
	19	Exhibit No. 22 of Document No. 10 (Motion for Partial Summary Judgment) of Cite No. 16 above; filed March 6, 2008 (3 pages)								
Examiner					Date					
Signature	ll ll				Considered					

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